GRANT COUNTY CONSERVATION, SANITATION AND ZONING DEPT

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ZONING DISTRICT CHANGE APPLICATION PROCEDURES

FEE: \$400.00 for a Zoning District Change or a Zoning District Change and Comprehensive Plan Map Amendment

The following is a review of the overall procedure involved in applying for a Zoning District change. This review is not meant to be all-inclusive for all cases, but will provide an idea of the process and materials that are needed to complete an application for a Comprehensive Zoning Ordinance Zoning District change and Comprehensive Plan Map Amendment. The CSZ Dept. staff will answer questions about the application, but the staff cannot be responsible for any defects that may arise in your application nor provide you with legal advice.

Public hearings: A Comprehensive Zoning District Change requires a public hearing before the Town the property is located in, then the CSZ Committee and then the Grant County Board. In some cases, to change a zoning district, a Comprehensive Plan Map Amendment is also required. Public hearings are scheduled on a first come, first served basis.

Your first step is to contact the Town the property is located in and request for a Zoning District change hearing. At this hearing you present the Town Participation Form and your request. The Town will make there determination and complete their haft of the Town Participation Form and return the original to you. The second step is the County CSZ Committee hearing followed by the third step the County Board hearing which are both held at the Grant County Administrative Building.

The CSZ Committee hearing public notice:

For a Zoning District change only requires a class 2 posting, the request is posted twice for (2) two consecutive weeks. For a Zoning District change & Comprehensive Plan Map amendment requires a class 1 posting, the request is posted once for (30) days.

This packet contains: 1- Zoning District Change Application & 2- A Request For Town Participation Form

Application: A completed Zoning District Change/Comprehensive Plan Map Amendment application <u>must be signed by all property owner(s) of record</u>, then submitted {with fee} to the Grant County CSZ Dept. <u>before a public hearing date can be scheduled</u>. The Town Participation Form must be completed by the town then submitted to the CSZ Dept. prior to the CSZ Committee Hearing. If not received and accepted by the CSZ Dept. in time for the hearing and the request is postponed as a result, the applicant shall be required to pay another application fee. Only original documents are accepted, no copies or faxes.

A land division survey map for the area proposed to be rezoned is <u>required</u> by a Licensed Surveyor when a Zoning District Change applies to only a portion of a larger existing parcel or part of a base farm tract.

On the Zoning District Change/Comprehensive Plan Map Amendment Application under <u>Property Location</u>, the complete legal description of the property is required including the Tax Parcel ID number.

This legal description can be obtained from the following: (1) Property tax bill, (2) Plat of Survey, (3) Title policy, (4) From a Licensed Surveyor if a land division is proposed when rezoning a portion of a parcel. The full legal description may be an attachment. If an agent is to sign the application, written proof of agent authority is required to accompany the application.

If the property is in a Trust, the Trustee must sign the application and provide proof of authority with the names and addresses of all those with a beneficial interest in the Trust.

Please include a <u>day time phone number</u> on the application so we may reach you for questions or additional information.

At the CSZ Committee hearing The rationale for zoning relief must be given in narrative form by the petitioner and with information provided that the proposed rezone and/or associated structures are in accordance with the purpose and intent of the relevant Ordinance(s) and are not hazardous, harmful, offensive or otherwise adverse to the environment or the community. The petitioner, petitioner's attorney or agent must attend the public hearing and present testimony. This presentation can be of any length and can involve any additional materials that are relevant to the zoning district change request although the CSZ Committee would prefer that all presentation be kept as short as possible.

The order of presentation will be: (1) – The request is read into the record, (2) – CSZ staff findings, (3) – Petitioners presentation, (4) - Persons appearing in support, (5) – Persons appearing in opposition

All materials presented as evidence and exhibits by the petitioner will be marked and retained by the CSZ Committee.

All questions arising from the public shall be directed to the CSZ Committee Chairperson.

Board Decision: Following each CSZ Committee Public Hearing and assuming no extenuating circumstances accrue, the Committee will make a recommendation to the County Board. The final decision is made by the Grant County Board. The petitioner may attend the County Board meeting (recommended) at which the decision will be made however it is not mandatory to be there. The petitioner may also contact the CSZ Dept. the first working day after the County Board meeting to learn the Board's decision.

GRANT COUNTY ZONING DISTRICT CHANGE/COMPERHENSIVE PLAN MAP AMENDMENT APPLICATION

sanitation@co.grant.wi.gov Phone: 608-723-6377 X4 FAX: 608-723-6792

Office use:	Fee Paid \$	Date Received:
		FIRM/Flood Study:
Applicant:	31 0 2011111g District	Property Location:
Owner(s) Name		
		1/41/4 Sec TN RW
Mailing Address		Lot Block Addition
Phone#	-	Subdivision/CSM# Town of
Property Information:		Tax Parcel #
Total area of the base farm tract (total acreage of the contiguous	
·		acres {area(s) in square feet if less than an acre is:,}
Current use is:	<u>Pro</u>	oposed use is:
Current Zoning:		
	District of the Grant County C	Comprehensive Zoning Ordinance.
	District of the Grant County S	hore-land/Wetland Ordinance.
	District of the Grant County F	Toodplain Zoning Ordinance.
Rezoning Request:	·	
	listrict only or Amend t	he Comprehensive Plan & change the current zoning district
on the: entire parcel	oron	a portion of the parcel
to	district of the Grant County C	Comprehensive Zoning Ordinance
and/or to	district of the Grant Co	ounty Shore-land/Wetland Ordinance.
	way lines, easements, driveways, and all	s <u>required</u> showing the locations, boundaries, uses and sizes of all existing and other pertinent features. If a land division is proposed as part of the request a
IMPORTANT: If the Town Participation For result, the applicant shall be required to pay another.		SZ Dept. prior to the CSZ Committee hearing and the request is postponed as a
I/We the undersigned are applying for a Zoning attached plot plan and materials presented as exto Grant Co. CSZ Dept. staff to enter upon the	District Change for the above described vidence or exhibits pursuant to this reques above described property at their discreti	property and I/We hereby state that the information on this application, the st are accurate. I/We the undersigned property owner(s) hereby grant permission on during normal working hours to acquire information pursuant to this request. Committee hearing to be held on the above described property at he discretion of the
Property Owner(s) Signature		
Date		
Rezoning Application (05/15)		

GRANT COUNTY CONSERVATION, SANITATION AND ZONING DEPARTMENT REQUEST FOR TOWNSHIP PARTICIPATION

LAWS REGARDING COMPREHENSIVE PLANS:

Wisconsin Statute 66.1001(3) ACTIONS. Procedures that must be consistent with comprehensive plans. Beginning on January 1, 2010, land-use decisions made by local governmental units shall be consistent with that local governmental unit's Comprehensive Plan.

Section - 1

APPLICANT COMPLETES SECTION - 1

		_to be gra	anted a:
Brief descri	iption of r	request 1	
g Agenda. To en I form with your	sure that th application	he CSZ Con n.	ımittee o
ent	CII	RCLE O	NE
	Yes	No	
	Yes	No	N/A
	Yes	No	N/A
	Yes	No	N/A
ON THIS D	ATE		
BJECTS TO	THE RE	QUEST	
Number	Abstain	ed	
CLERK			
SUPERVISOR			
	g Agenda. To end form with your ent ON THIS D. BJECTS TO Number	Brief description of resure that the deform with your applications and the sent	Brief description of request g Agenda. To ensure that the CSZ Cond form with your application. CIRCLE OF Yes No Yes No Yes No ON THIS DATE DBJECTS TO THE REQUEST Number Abstained CLERK